

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

							Atto	rney D	ocket	t No:	PD-2	01155	
										Origina Continu Divisior Continu Gupple	uation n uation	ı-in-Part	
As a below named in		•											
My residence, post of	fice add	lress an	d citizeı	nship are as stated bel	ow n	ext to	my na	ame.					
inventor (if plural nam	nes are l	isted be	low) of	ntor (if only one name i the subject matter whic allel Scan For Identic	ch is	claime	d and	d for w	hich a	a pater	nt is s	oint sought on	
	tached l		as Appl	ication Serial No.									
I hereby state that I he claims, as amended b	ave revi by an an	ewed ar nendme	nd unde nt refer	erstand the contents of red to above.	the a	above i	denti	fied sp	ecific	ation,	includ	ding the	
Tacknowledge the du De material to patenta	ty to dis ibility as	close to defined	the Un I in Title	ited States Patent and 37, Code of Federal F	Trad Regul	lemark lations	Offic , §1.5	e all in 6.	ıforma	ation k	nown	to me to	
patent or inventor's ce other than the United	ertificate States o ertificate	or 365 of Ameri or of a	(a) of a ca, liste ny PCT	35 U.S.C. §§119(a)-(d ny PCT international ap ed below and have also international application	oplica ider	ation th ntified I	nat de below	esignat any fo	ed at	least of application	one c catior	ountry n(s) for	
Foreign Application Number		Country		Foreign Filing Date (MM/DD/YYYY)	F	Priority	ity Claimed			Certified Copy Attached			
Number						Yes		No		Yes		No	
		,		-		Yes		No		Yes		No	
	nefit und	ler 35 U	.S.C. §	119(e) of any United St	ates	provis	ional	applic	ation(s) liste	ed be	low:	
Application Numb	Application Number F		ling Date (MM/DD/YYYY)										
international application each of the claims of the manner provided States Patent and Tra	on desig this app by the fi ademark ecame a	inating t lication i rst para Office a available	he Unit is not di graph o all inforr betwee	20 of any United State ed States of America, I isclosed in the prior Unif 35 U.S.C. §112, I ack mation known to me to en the filing date of the	isted ited (now be m	l below States ledge t nateria	and, or Po the du I to pa	insofa CT inte uty to c atental	ar as ternation disclossibility and the terms of the term	the sub onal ap se to that as defi	oject i oplica he Ur ned ii	ition in nited n 37	
U.S. Parent Application or Parent PCT Number			Filing Date (MM/DD/YYY)			Y 1 1				tent Number applicable)			
		-											

Page 2 of 2

Attorney Docket No: PD-201155

I hereby appoint the following attorneys, or agent and attorneys, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

John T. Whelan

Registration No. 32,448

Craig L. Plastrik

Registration No. 41,254

Michael W. Sales

Registration No. 30,213

Correspondence Address:

Name:

Hughes Electronics Corporation

Patent Docket Administration

Address:

P.O. Box 956

Bldg. 1, Mail Stop A109

City/State/Zip: Country:

El Segundo, CA 90245-0956

USA

Telephone: 301-428-5965

Facsimile: 301-428-2802

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or Joint Inventor:	Inventor's Signature:		Date:							
Niall Ffrench	Nine P. Spend		10/18/01							
Residence (City and State)	ship									
San Diego, CA	USA									
Besidence Address (Street/City/State/Zip)										
7650 Palmilla Drive, #3, San Diego, CA 92122										
Full Name of Joint Inventor:	Inventor's Signature:		Date:							
Árjun Punshi	DP 1		10/18/01							
Residence (City and State)	Citizen									
San Diego, CA	India									
Residence Address (Street/City/State/Zip)										
8707 Park Run Road, San Diego, CA 92129										
Full Name of Joint Inventor:	Inventor's Signature:	Date:								
Residence (City and State)	Citizenship									
Residence Address (Street/City/State/Zip)										
Full Name of Joint Inventor:	Inventor's Signature:		Date:							
Residence (City and State)	Citizen	zenship								
Residence Address (Street/City/State/Zip)										
×,										